

APPENDIX–2013 SUMMARY OF HANDBOOK CHANGES

2013 VFC Provider Handbook Summary of Changes (Highlighted in yellow in body of Handbook)	Page
Section 1–Introduction	
• Added definitions of integrated and aggregate provider in imMTrax	7–8
Section 2–Provider Enrollment	
• Added education requirement for re-enrolling and newly enrolling providers	10–11
• Added requirement - providers must notify Immunization Program if info changes	10
• Added storage unit approval requirement for newly enrolling providers	11
Section 3–Billing	
• Revised to include new vaccine administration fee cap and guidance from the CDC	13
Section 4–Eligibility	
• Updated to require documenting eligibility screening at every visit	15
• Added websites that give locations of FQHCs and RHCs	16
• Updated to distinguish documentation requirements from methods used to determine provider profiles	16–17
• Updated table footnotes to include new billing guidance	18–20
Section 5–ACIP	
• Reworded to clarify that VFC providers agree to comply with ACIP schedules, dosages, and contraindications	21
Section 6–NCVIA	
• Updated to include electronic management of VISs	23
Section 7–VFC Compliance Site Visits	
• Removed reference to AFIX activities throughout	25–27
• Added Unannounced Storage and Handling Visit requirement	26
Section 8–VFC Requirement Checklist	
• Once (upon enrollment or as needed) –	29
• Added submission of one week of data logger data for storage unit approval	
• Added enrollment education requirement for Vaccine Manager and Alternate	29
• Every Vaccination Visit – Revised eligibility screening to include documenting at every visit	
• Twice Daily – Revised to require the use of State-supplied paper temperature logs	29
• Yearly – Added annual education requirement for Vaccine Manager and Alternate	29
• As Needed – Added requirement to have storage units approved by submitting one week of data	29
Section 9–Non-Compliance, Fraud, and Abuse	
• Updated policy to include CDC definitions and obligation to refer fraud and abuse to third party for investigation	31–32
Section 10–Immunization Resources	
• Updated with current staff contact information	35
Section 11–Vaccine Management Plan Introduction	
• Added reference to Section 17 – Vaccine Loss and Replacement Policy	39
• Added heading to emphasize requirement to review Vaccine Management Plan once per calendar year	39

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Section 12–Vaccine Management and Emergency Plan	
• Added Immunization Program contact information to Emergency Contact table	41
• Added space to describe method of rotating stock and that expiration dates must be checked weekly	42
Section 13–Vaccine Storage Units	
• Included all requirements under “General Requirements” heading	46
• Updated policy prohibiting the use of dormitory-style storage units	46
• Clarified policy allowing combined domestic units, but that the CDC recommends stand-alone units	46–47
• Clarified policy on manual defrost versus frost-free freezers	47–48
• Added section requiring approval of storage units before use	50
• Added requirement that expiration dates must be checked weekly and to record process for rotating vaccine in Section 12	51
• Updated routine temperature monitoring to comply with CDC recommendations	51
Section 14–Thermometer (Data Logger) Policy	
• Updated entire section to include new thermo-couple Data Loggers, storage unit approval policy, and temperature monitoring requirements	53–54
Section 15–Ordering and Receiving Vaccine	
• Added section on seasonal influenza vaccine orders	58
• Added requirement to call MSCC the same day of receipt, when vaccine shipments are suspected of being compromised	59
• 07/22/2013 updated to include online ordering in imMTrax	55–61
Section 16–Managing Inventory	
• Added requirement to check expiration dates weekly and that inventory management process must be recorded in Section 12	61
• Added instructions to immediately segregate expired, wasted, and spoiled vaccine from viable vaccine	62
• Added requirement that expired/spoiled vaccine must be returned to McKesson within six months of spoilage or expiration	62
• Added restriction that borrowing influenza vaccine across seasons is not allowed	63
• Added “borrowing cheat sheet” resource	63
• Added that private payback vaccine must be managed in imMTrax	63
Section 17–Vaccine Loss and Replacement	
• New section added that describes vaccine restitution policy	65–66
Section 18–Specialty Providers	
• Added requirement that pharmacies must vaccinate “walk-in” clients and cannot refuse to vaccinate VFC-eligible children based on a parent’s inability to pay the administration fee	68